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PTO

UTILITY	Atty Doc. No. <u>51315</u> Total Page <u>28</u>		
PATENT APPLICATION	FIRST NAMED INVENTOR OR APPLICATION IDENTIFIED		
TRANSMITTAL	Sabine OEPEN		
	Express Mail Label No		
Application Elements	Address To: Assistant Commissioner for Patents Box Patent Application Washington, D.C. 20231		
X / Fee transmittal Form (Submit an original, and a duplicate for fee processing) X/Specification Total Pages / (Preferred arrangement set for below)	6. / / Microfiche Computer Program (Appendix) /7./ /Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)		
scriptive title of the Invention	a./ / Computer Readable Copy		
oss References to Related Application	b/ / Paper Copy (Identical to computer copy)		
tement Regarding Fed. Sponsored R & D	c/ / Statement verifying identity of above copies		
ference to Microfiche Appendix	ACCOMPANYING APPLICATIONS PARTS		
ckground of the Invention	8./ X / Assignment Papers (cover sheet & document(s)		
ef Summary of the Invention	9/ / 37 CFR 3.73(b)Statement / /Power of Attorney		
ef Description of the Drawings (if filed)	10./ /English Translation Document (if applicable)		
tailed Description	11./ /Information Disclosure / / Copies of IDS Citations		
aim(s)	12./ /Preliminary Amendment		
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./X /Oath or Declaration a /x / Newly executed (or	Total Pages/ 4 /
a /x / Newly executed (or	iginal or copy)
h / /Conv from a prior a	onlication (37 CFR 1.63(d)

3./ / Drawing(s)(35 USC 113)(Figs.)

opy from a prior application (37 CFR 1.03(d)
(For Continuation/Divisional with Box 17 completed)
Note Box 5 below
i./ / DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application see 37 CFR 1.63(d)(2) and 1.33(b).

Total Sheets / /

5. / / Incorporation by reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.

Should be specifically itemized) /Small Entity / /Statement filed in prior application Statements Status still proper and desired / Certified Copy of Priority Document(s) (if foreign priority is claimed)
/ Other

or / / Correspondence address below

7. If a Contin	uing Applicatio	n, check appropriate	e box and supply the requisite inf	ormation:	
1	/Continuation	/ /Divisional	/ / Continuation-in part (CIP)	of prior application No	
		700			
CORRESPON	DENCE ADDR	ESS			

Insert Customer No. or Attach bar code label here

Name:

Herbert B. Keil

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The filing fee has been calculated as shown below:

Fort	Number Filed	Number Extra	SMALL/LARGE ENTITY	BASIC FEE \$355./\$710.
For:				
Basic Fee	• • • • • • • • •			\$_710.00
Total Claims:	<u>7</u> -20	= x	\$09./\$18. =	
Indep. Claims:		= x	\$40./\$80. =	
[] Multiple Dependent Claim(s) presented:\$135./270 =				
[x] A check is	enclosed f	or the filing	g fee.	\$ 710.00
*If the differ	ence is les	s than zero,	enter "0".	

- A check for \$750.00 for the filing fee and assignment [X] recordation.
- The Commissioner is hereby authorized to charge any other [X] fee required, including the issue fee, in connection with the filing and prosecution of this application, and to the extent necessary, applicant(s) hereby petition for extension(s)of time under 37 CFR 1.136, to be charged to our Deposit Account 11-0345.

Respectfully submitted,

KEIL & WEINKAUF

Herbert B. Keil Reg. No. 18,967

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